

Developmental Disabilities Services Innovation Think Tank

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CLINICAL AND CRISIS SERVICES

~ *WHAT IS HAPPENING NOW* ~

Clinical Services are medically necessary therapeutic or medical services or equipment. **Crisis Services** are time limited, intensive supports provided when a person may have a psychological, behavioral or emotional crisis.

Clinical Services	Crisis Services
<ul style="list-style-type: none"> - Clinical Assessment - Therapy <ul style="list-style-type: none"> - Individual - Family - Group - Medication, Medical Support, Consultation - Other Medical Services not paid for by Medicaid State Plan 	<ul style="list-style-type: none"> - Crisis Assessment, Support, Referral - Crisis Beds

FY 2017

Crisis, Clinical and Related Services and Supports	
- People who had individual crisis services in their budget	377
- People who used a statewide crisis bed	35
- Total days the statewide crisis beds were used	568
- People who had clinical services in their budget	1,988
- People who had a psychiatric inpatient stay (Level 1 bed)	5
- Total days of psychiatric inpatient stays	238
- People who were considered to pose a risk to public safety	220

- Vermont Crisis Intervention Network provides statewide technical assistance, training and crisis supports.
- Funding may be provided in a person's budget to meet specific clinical and crisis support needs.
- Guidelines from the state must be followed for behavior support and support to help people with unique needs (such as those who pose a risk to public safety).

CLINICAL AND CRISIS SERVICES

(What is Happening Now)

- 41% of people surveyed were reported as having a “mood disorder” (National Core Indicators – NCI)
- 35% of people surveyed were reported as having “behavior challenges” (NCI)
- 9% of people surveyed were reported as having a “psychotic disorder” (NCI)
- 58% of people surveyed were reported as taking at least one medication for “mood, anxiety and/or psychotic disorder” (NCI)
- 22% of people surveyed were reported as taking at least one medication for “behavior challenges” (NCI)
- 36% of people surveyed were reported as having a “behavior support plan” (NCI)

~ WHAT ARE THE CHALLENGES ~

- Needing more local crisis beds and transitional housing.
- Concerns about risk, liability and community protection.
- Some therapies, such as “talk therapy”, do not work as well for a person with limited communication.
- Knowing how to best support people with dementia and Alzheimer’s.
- Addressing mental health issues is not agencies’ primary area of expertise.
- Mental health crisis teams having limited knowledge about people with developmental disabilities.
- Lack of supports for people with multiple complex issues, such as mental illness, drug and alcohol use, criminal behaviors, homelessness and poverty.
- Billing issues when both mental health and developmental disabilities services are provided at an agency.
- Finding drug and alcohol counselors who work with people with developmental disabilities. Finding the right therapy that works for people with an addiction.

CLINICAL AND CRISIS SERVICES

~ *WHAT CAN WORK WELL* ~

- Offering therapies that are hands-on and involve working with people in a physically active, socially engaged way.
- Offering therapies that use physical contact with animals, such as dogs and horses, to help people learn to have trusting relationships.
- Offering therapies that use sensory experiences to change behavior.
- Police and crisis workers who are trained and work together on how best to respond in emergencies.
- Hiring clinical staff to work in developmental disabilities services.
- Having agency crisis response available to people who get mental health, developmental disabilities and substance abuse services.
- Providing an initial assessment that looks at a person's risk, individual needs and what type of therapy might work best.
- Responding to a person's emotional and social needs to make it more likely they will stop abusing drugs or alcohol.
- Creating support groups for caregivers of people who have dementia or Alzheimer's.

CLINICAL AND CRISIS SERVICES

~ DISCUSSION QUESTIONS ~

It might be helpful to get your ideas for the retreat ready ahead of time.

These are questions we will be talking about:

1. What type of supports were offered to someone in crisis that you have seen work best?
2. What type of supports were offered to someone in crisis that you have noticed were not helpful? Could have been done differently?
3. What do you think could be done to help people get the therapy they need?
4. What creative supports or ways of doing things that you have learned about that are used in other places?